

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

APPLICANT(S)

FILING DATE

10664,387

9-17-03 4-20-07 9-21-07 CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1		1	
2						
3						
4						
5						
6						
7						
8						
9						
10	1		1		1	
11						
12						
13						
14						
15	1		1		1	
16						
17						
18						
19						
20	1		1		1	
21	1		1		1	
22	1		1		1	
23	1		1		1	
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28						
29						
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31						
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42						
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45						
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47						
48						
49						
50						
TOTAL IND.	7		8		8	
TOTAL DEP.	2		2		2	
TOTAL CLAIMS	9		10		10	

	★		★		★	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
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95						
96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

APPLICANT(S)

FILING DATE

12/24/387

35-08 7-D-0X CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1		1	
2						
3						
4						
5						
6						
7						
8						
9						
10			1		1	
11						
12						
13						
14						
15			1		1	
16						
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18						
19						
20						
21						
22						
23						
24						
25			2		1	
26						
27						
28						
29						
30						
31						
32						
33				1		1
34				1		1
35				1		1
36						1
37						
38						
39						
40						
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.		↓	3	↓	3	↓
TOTAL DEP.		↓		↓		↓
TOTAL CLAIMS						

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
55						
56						
57						
58						
59						
60						
61						
62						
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95						
96						
97						
98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		↓		↓		↓
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS